

AMENDED IN SENATE AUGUST 25, 2004
AMENDED IN SENATE AUGUST 23, 2004
AMENDED IN SENATE AUGUST 17, 2004
AMENDED IN ASSEMBLY MAY 20, 2004
AMENDED IN ASSEMBLY APRIL 15, 2004

CALIFORNIA LEGISLATURE—2003–04 REGULAR SESSION

ASSEMBLY BILL

No. 2532

**Introduced by Assembly Member Hancock
(Principal coauthor: Assembly Member Koretz)**

February 20, 2004

An act to add Section 6403.5 to the Labor Code, relating to health facilities.

LEGISLATIVE COUNSEL'S DIGEST

AB 2532, as amended, Hancock. Hospitals: lift teams.

Existing law regulates the operation of health facilities, including hospitals.

Existing law, the California Occupational Safety and Health Act of 1973, establishes certain safety and other responsibilities of employers and employees, including, but not limited to, the requirement that no employer shall fail or neglect to provide safety devices or safeguards reasonably necessary to render the employment safe. Willful or repeated violations are a crime.

This bill would require each general acute care hospital, except rural general acute hospitals, to establish a health care worker back injury

prevention plan. This bill would require each hospital to conduct a needs assessment that utilizes a lifting and transferring process identifying patients needing lift teams, lifting devices, and lifting equipment.

This bill would require hospitals to implement a “zero lift policy” for all shifts, to utilize lift teams, lifting devices, and lifting equipment, and to train health care workers on the appropriate use of lifting devices and equipment. This bill would require lift team members to receive specialized training and to demonstrate proficiency in safe techniques for lifting or transferring patients and while using lifting or transferring devices and equipment.

This bill would provide that a health care worker who refuses to lift a patient would not be disciplined, unless the worker had been trained on appropriate patient and equipment lifting procedures and has appropriate, functional lifting devices and equipment available to perform the requested lift. By changing the definition of a crime, this bill would impose a state-mandated local program.

This bill would become operative on ~~July 1, 2005~~ January 1, 2006.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 6403.5 is added to the Labor Code, to
2 read:
3 6403.5. (a) As part of their injury and illness prevention
4 programs required by this chapter, all general acute care hospitals
5 as defined in subdivision (a) of Section 1250 of the Health and
6 Safety Code shall adopt a health care worker back injury
7 prevention plan. As part of their plan, each hospital shall conduct
8 a needs assessment in relation to patient lifts. As part of the needs
9 assessment, each hospital subject to this section shall develop a
10 lifting and transferring process that identifies the patients that
11 require the appropriate use of lift teams and lifting devices and

1 equipment. For purposes of this section, a “lifting and transferring
2 process” shall mean a system whereby patients are identified
3 based on the potential risk of injury to the health care worker in the
4 event the worker would need to lift or transfer that patient.

5 (b) Hospitals shall implement a “zero lift policy” for all shifts
6 for patients identified pursuant to subdivision (a) as requiring lift
7 teams and the use of lifting devices and equipment. Each general
8 acute care hospital subject to this section shall, as appropriate and
9 consistent with the needs assessment developed pursuant to
10 subdivision (a), utilize lift teams and lifting devices and
11 equipment. For purposes of this section, “zero lift policy” means
12 replacing manual lifting and transferring of patients with powered
13 patient transfer devices, lifting devices, or lift teams as defined in
14 subdivision (d), consistent with the needs assessment developed
15 pursuant to subdivision (a). Each general acute care hospital
16 subject to this section shall provide training to health care workers
17 on the appropriate use of the lifting devices and equipment.
18 Training for these health care workers shall include body
19 mechanics and the use of lifting devices to safely handle patients.

20 (c) Lift team members shall be given specialized training and
21 shall demonstrate proficiency in safe techniques for lifting or
22 transferring patients and the appropriate use of lifting or
23 transferring devices and equipment. Lift teams shall utilize lifting
24 devices and equipment when assisting health care workers
25 throughout the hospital to lift patients unless specifically contra
26 indicated for the patient’s condition or medical status.

27 (d) For purposes of this section, “lift team” means hospital
28 employees specially trained to handle patient lifts and transfers.
29 *Nothing in this section precludes lift team members from*
30 *performing other duties as assigned during their shift.*

31 (e) A health care worker who refuses to lift a patient due to
32 concerns about worker and patient safety and the lack of trained
33 lift team personnel or equipment may not, based upon the refusal,
34 be the subject of disciplinary action by the hospital or any of its
35 managers or employees.

36 (f) Notwithstanding subdivision (e), the hospital, its managers
37 or employees may discipline a health care worker who refuses to
38 lift a patient if the health care worker has been trained on
39 appropriate patient and equipment lifting procedures, and has

1 appropriate, functional lifting devices and equipment available to
2 perform the requested lift.

3 (g) This section shall not apply to hospitals licensed by the
4 State Department of Health Services as rural general acute care
5 hospitals as defined in subdivision (a) of Section 1250 of the
6 Health and Safety Code.

7 (h) It is not the intent of this section to prescribe a particular
8 process for acute care facilities subject to this section.

9 SEC. 2. This act shall become operative on ~~July 1, 2005~~
10 *January 1, 2006*.

11 SEC. 3. No reimbursement is required by this act pursuant to
12 Section 6 of Article XIII B of the California Constitution because
13 the only costs that may be incurred by a local agency or school
14 district will be incurred because this act creates a new crime or
15 infraction, eliminates a crime or infraction, or changes the penalty
16 for a crime or infraction, within the meaning of Section 17556 of
17 the Government Code, or changes the definition of a crime within
18 the meaning of Section 6 of Article XIII B of the California
19 Constitution.

